AMENDMENTS TO THE CLAIMS

1. (Previously Presented) A method of determining that a pregnant woman is at risk of developing pre-eclampsia or that her fetus is at risk of developing intrauterine growth restriction (IUGR), which method comprises:

(a) measuring asymmetric dimethylarginine (ADMA) in a plasma sample taken from a pregnant woman at a stage of pregnancy from 23 to 25 weeks gestation; and

(b) determining that the woman is at risk of developing pre-eclampsia or her fetus is at risk of developing IUGR if the level of ADMA in the plasma sample is greater than 1.5 μmol/L.

2-5. (Canceled)

6. (Previously presented) The method of claim 1, wherein determining that the woman is at risk of developing pre-eclampsia or determining that her fetus is at risk of developing IUGR comprises determining that the woman's ADMA level is at least 3 times the normal pregnancy level.

7. (Previously presented) The method of claim 1, wherein determining that the woman is at risk of developing pre-eclampsia or determining that her fetus is at risk of developing IUGR comprises determining that the woman has an increase in the ADMA/symmetric dimethylarginine (ADMA/SDMA) ratio that is greater than the normal pregnancy ratio.

8. (Previously presented) The method of claim 7, comprising determining that the ADMA/SDMA ratio is at least 5 times more than the normal pregnancy ratio.

9-10. (Canceled)

11. (Previously presented) The method of claim 1, further comprising carrying out Doppler waveform analysis of the uterine arteries and/or flow-mediated dilatation of the brachial artery in the woman.

12-28. (Canceled)